STATEMENT OF FACT

♦♦

Student's Name ________________________________ SSN__________________________

(Please print legibly)

♦♦

I, ____, hereby certify that:

I declare under penalty of perjury that the above statement is true and correct. **<u>NOTE</u>: If the above statement is found to be false, you may be liable to repay any monies or services rendered in your behalf.**

___________________________________ ______________________

Signature Date